

UNITED STATES DISTRICT COURT
FOR THE
DISTRICT OF MASSACHUSETTS

TERIZA SHEHATOU, INDIVIDUALLY,)
CINDY LOUKA P.P.A. TERIZA)
SHEHATOU AND SALLY LOUKA)
P.P.A. TERIZA SHEHATOU,)
Plaintiffs)

v.)

CHERYL L. SCHARDT, JAY A.)
HOPKINS, P. KEYBURN HOLLISTER,)
JOHN R. GOBEL, ALLSTATE)
INSURANCE COMPANY and)
COMMERCE INSURANCE COMPANY,)
Defendants)

Docket No. 05-30195-KPN

AFFIDAVIT OF COMPLIANCE

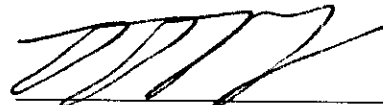
I, Buffy D. Lord, do hereby depose and swear as follows:

1. I am an attorney licensed to practice law in Massachusetts and am an associate in the law firm of Donovan & O'Connor, LLP, with offices at 1330 Mass MoCA Way, North Adams, Massachusetts 01247.
2. Donovan & O'Connor, LLP, represents the plaintiffs, Teriza Shehatou, Cindy Louka and Sally Louka, in the above-captioned matter.
3. On or about September 13, 2005, the plaintiffs' counsel requested service on defendant Jay A. Hopkins to be made pursuant to G.L. c. 90, § 3B upon the Registrar of Motor Vehicles.
4. On or about September 26, 2005, service was made upon the Registrar of Motor Vehicles.

5. On or about October 3, 2005, plaintiffs' counsel sent notice of the service upon the Registrar of Motor Vehicles and copies of the summons and complaint to defendant Jay A. Hopkins by certified mail, return receipt requested, in accordance with G.L. c. 90, § 3C. See attached copy of certified return receipt.

I hereby certify that the foregoing document is being filed within the designated time or by leave of the Regional Administrative Justice.

Signed under the pains and penalties of perjury this 14th day of October, 2005.

A handwritten signature in black ink, consisting of several stylized, overlapping loops and a long horizontal stroke at the end.

Buffy D. Lord

BDL:lac:smg

U.S. Postal Service™

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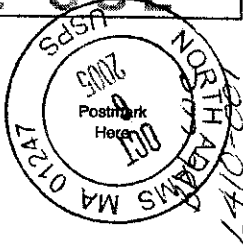
Postage \$ 1.06

Certified Fee 2.30

Return Receipt Fee (Endorsement Required) 1.75

Restricted Delivery Fee (Endorsement Required)

Total Postage & Fees \$ 5.11



Sent To MR. JAY A. HOPKINS

Street, Apt. No., or PO Box No. 20 JOHN STREET

City, State, ZIP+4 PITTSFIELD MA 01201

PS Form 3800, June 2002 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:
Mr. Jay A. Hopkins
20 John Street
Pittsfield, MA 01201

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Karen Green ☒ Agent ☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

10/5

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☒ No

3. Service Type

☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

2. Article Number

(Transfer from service label)

7004 1160 0005 1911 4321

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540